

REMARKS

Claims 1-4, 7-15 and 17, 18 and 21-27, 29 and 30-35 are pending in this application after this Amendment. Claims 1-4, 7-15, 17, 18, 21-27 and 29 have been rejected. Claims 30-35 are newly added. No new matter has been added. It is respectfully submitted that the pending claims define allowable subject matter.

Claims 12-15, 17 and 18 have been rejected under 35 U.S.C. §101 as being directed to non-statutory subject matter. The Office Action asserts that the claimed method does not transform the underlying subject matter to a different state or thing, or is not tied to another statutory class (Office Action, page 2). Applicants respectfully disagree and traverse this rejection.

Claim 12 recites a method for providing knowledge-based diagnostic imaging including “analyzing a patient to obtain a new patient data set containing at least one of MR data, CT data, ultrasound data, x-ray data, SPECT data and PET data.” The process of analyzing a patient to obtain patient data necessarily is tied to another statutory class, namely some type of device to analyze the patient to obtain the patient data. Accordingly, Applicants submit that the rejection under 35 U.S.C. §101 of independent claim 12 and claims 13-15, 17 and 18 that depend therefrom should be withdrawn.

Claims 1-3, 7-14, 17 and 18 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Lemelson et al. (U.S. Patent 5,878,746), hereafter Lemelson in view of DiFilippo et al. (U.S. Patent Application Publication 2002/0164059), hereafter DiFilippo. Claims 4 and 15 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Lemelson in view of DiFilippo and further in view of Brady et al. (U.S. Patent 7,200,612), hereafter Brady. Claims 21-27 and 29 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Lemelson in view of Brady. Applicants respectfully traverse these rejections for at least the reasons set forth hereafter.

Independent claims 1 and 12 have been amended to recite comparing measured parameters from a new patient data set to standard values for physiologic parameters from past patient data sets to identify an abnormality and if an abnormality is not identified further

comparing the measured parameters from the new patient data set to measured values for the physiologic parameters from the past patient data sets. Applicants submit that the cited references fail to describe the claimed invention.

The cited references, including in particular Lemelson, include systems and methods that compare new and past data (which may include group or statistical data) to identify matches for determining changes in a patient's condition. For example, the Lemelson reference describes comparing feature vectors to determine changes in an anatomical structure (see, e.g., Lemelson, column 6, line 58 to column 7, line 28). However, none of the cited references describe comparing measured parameters from a new patient data set to standard values for past patient data sets to identify an abnormality and if an abnormality is not identified further comparing measured parameters from the new patient data set to measured values for past patient data sets. This comparison of measured parameters from a new patient data set to standard values and measured values (if no abnormality was identified) is not described in the cited references. Accordingly, Applicants submit that claims 1 and 12 are allowable.

Claim 21, as amended recites a network including, among other elements "an interconnection between said diagnostic equipment and said database, said database providing past patient images for previously analyzed patients and wherein said interconnection provides on-line contemporaneous interaction between healthcare providers at different interconnected healthcare facilities." As discussed with the Examiner on March 30, 2009, the cited references do not describe the claimed "on-line contemporaneous interaction between healthcare providers at different interconnected healthcare facilities." The required on-line contemporaneous interaction recited in claim 21 is not provided in the cited references. The cited references, including in particular Brady, merely describe different geographically separate sites such as different hospitals that generate and store information to a central database for later access by different users. However, none of the users are interacting contemporaneously on-line. Accordingly, Applicants submit that claim 21 is allowable.

Additionally, Applicants submit that dependent claims 2-4, 7-11, 13-15, 17, 18, 22-27, 29 and newly added claims 30-35 recite additional subject matter not anticipated or rendered obvious by the cited references. Further, dependent claims 2-4, 7-11, 13-15, 17, 18, 22-27, 29

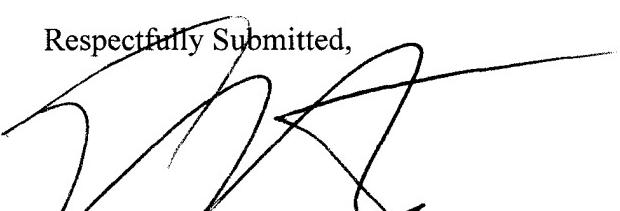
and 30-35 are patentable over the cited references based at least on the dependency of these claims from the independent claims.

There may be additional and/or alternative reasons to the reasons argued herein and/or herebefore that claims 1-4, 7-15 and 17, 18 and 21-27, 29 and 30-35 are each patentable over the cited references. Without waiver of any additional and/or alternative reasons, Applicants reserve the right to argue any additional and/or alternative reasons hereafter.

In view of the foregoing amendments and remarks, it is respectfully submitted that the cited references neither anticipate nor render obvious the claimed invention and the pending claims in this application are believed to be in condition for allowance. Reconsideration and favorable action is respectfully solicited. Should anything remain in order to place the present application in condition for allowance, the Examiner is kindly invited to contact the undersigned at the telephone number listed below.

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Respectfully Submitted,



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